

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Trusted Leadership PAC

ADDRESS (number and street) ▼

1101 West 34th Street

Suite 461

☒ Check if different than previously reported. (ACC)

Austin

TX

78705

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00609511

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

Convention (12C)

☐

General (12G)

☐

Special (12S)

☐

Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kurt O'Keefe

Signature of Treasurer

Kurt O'Keefe

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Trusted Leadership PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
04 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	1129390.18	
(c) Total Receipts (from Line 19) .....	3666373.50	8408923.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	4795763.68	8408923.50
7. Total Disbursements (from Line 31) .....	3720524.74	7333684.56
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1075238.94	1075238.94
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Trusted Leadership PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
04 / 01 / 2016

To:

M M / D D / Y Y Y Y Y  
04 / 30 / 2016
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3400662.50

7242112.50

(ii) Unitemized .....

4711.00

5311.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

3405373.50

7247423.50

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

261000.00

1161500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

3666373.50

8408923.50

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

3666373.50

8408923.50

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

3666373.50

8408923.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	378061.67	658566.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	378061.67	658566.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250000.00	1715763.70
24. Independent Expenditures (use Schedule E) .....	2987463.07	4854353.87
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	105000.00	105000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	105000.00	105000.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3720524.74	7333684.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3720524.74	7333684.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3666373.50	8408923.50
34. Total Contribution Refunds (from Line 28(d)) .....	105000.00	105000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3561373.50	8303923.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	378061.67	658566.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	378061.67	658566.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald Arner**

Mailing Address 1960 Woodland Road

City State Zip Code  
 Montoursville PA 17754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4787**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chris Bachelder**

Mailing Address 1194 Brookgate Way NE

City State Zip Code  
 Alanta GA 30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TODD INVESTMENT ADVISORS, INC

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016

**Transaction ID : SA11AI.4713**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Terry Bailey**

Mailing Address 1008 Southview Circle

City State Zip Code  
 Center TX 75935

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45202.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2016

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period

45202.50

☐ Memo Item

In-kind - Event Dinner

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50702.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Kim Bengard**

Mailing Address 3912 Calle Ariana

City

San Clemente

State

CA

Zip Code

92672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2016

**Transaction ID : SA11AI.4707**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Rhonda Binckes**

Mailing Address 27171 Cordero Lane

City

Mission Viejo

State

CA

Zip Code

92691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lucas Oil Products Inc

Occupation

Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2016

**Transaction ID : SA11AI.4891**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Karen Buchwald Wright**

Mailing Address 35 Backjack Road Ext

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ariel Corp

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2016

**Transaction ID : SA11AI.4718**

Amount of Each Receipt this Period

150000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 79  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Burstein**Mailing Address 11600 Washington Place  
Suite 104

City	State	Zip Code
Los Angeles	CA	90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Burstein Law Firm

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2016

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Carolina Casperson**Mailing Address 1700 Lincoln St  
Suite 2550

City	State	Zip Code
Denver	CO	80203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Christian Science Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Carolina Casperson**Mailing Address 1700 Lincoln St  
Suite 2550

City	State	Zip Code
Denver	CO	80203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Christian Science Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2016

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10135.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Carolina Casperson**

Mailing Address 1700 Lincoln St  
Suite 2550

City State Zip Code  
Denver CO 80203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Christian Science Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2016

**Transaction ID : SA11AI.4888**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Carolina Casperson**

Mailing Address 1700 Lincoln St  
Suite 2550

City State Zip Code  
Denver CO 80203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Christian Science Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2016

**Transaction ID : SA11AI.4889**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Carolina Casperson**

Mailing Address 1700 Lincoln St  
Suite 2550

City State Zip Code  
Denver CO 80203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Christian Science Practitioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2016

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 79

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. John Childs**

Mailing Address 1000 Winter Street  
Suite 4300

City State Zip Code  
Waltham MA 02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JW Childs Associates

Occupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2016

**Transaction ID : SA11AI.4700**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Joseph A Cleary Jr.**

Mailing Address 1 S. West Oak Drive

City State Zip Code  
Houston TX 77056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harvey Cleary Builders

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2016

**Transaction ID : SA11AI.4882**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Richard H Collins**

Mailing Address 8150 N Central Expwy  
#1900

City State Zip Code  
Dallas TX 75206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R Collins Enterprises Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2016

**Transaction ID : SA11AI.4859**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Crow Holdings Pool LLC**

Mailing Address 3819 Maple Ave

City State Zip Code  
 Dallas TX 75219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2016

**Transaction ID : SA11AI.4866**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Date Mining Services LLC**

Mailing Address 1400 South Main St

City State Zip Code  
 Harrisburg IL 62946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4765**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Richard Devos**

Mailing Address 7575 Fulton Street East

City State Zip Code  
 Ada MI 49355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Amway

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2016

**Transaction ID : SA11AI.4699**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

A. Christopher S Ewin M.D.

Mailing Address 1816 Westover Square

City State Zip Code  
Fort Worth TX 76107

FEC ID number of contributing federal political committee.

C

Name of Employer

One to One Health Care

Occupation

President/Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 14 2016

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bobby Gaspard

Mailing Address 31103 Quinn Road

City State Zip Code  
Tomball TX 77375

FEC ID number of contributing federal political committee.

C

Name of Employer

Freeport LNG Development LP

Occupation

Marketing Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 15 2016

Transaction ID : SA11AI.4820

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joel Geiderman

Mailing Address 9440 Santa Monica Blvd

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee.

C

Name of Employer

Cedars-Sinai Medical Center

Occupation

Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 01 2016

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

18000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. James R Glidewell**

Mailing Address 4141 MacArthur Blvd

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Glidewell Laboratories

Occupation

Owner, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4733**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Global Mine Service Inc**

Mailing Address PO Box 188

City

Fayette City

State

PA

Zip Code

15438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4762**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GMS Mine Repair & Maint Inc**

Mailing Address PO Box 2446

City

Mt Lake Park

State

MD

Zip Code

21550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4763**

Amount of Each Receipt this Period

8000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Roger Hertog**

Mailing Address 745 Fifth Avenue  
Suite 1400

City State Zip Code  
New Your NY 10151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hertog Foundation

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2016

Transaction ID : SA11AI.4860

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Donald B Huffines**

Mailing Address 8200 Douglas Ave  
#300

City State Zip Code  
Dallas TX 72552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huffines Communities

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

Transaction ID : SA11AI.4724

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Phillip W Huffines**

Mailing Address 8200 Douglas Ave  
#300

City State Zip Code  
Dallas TX 72552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huffines Communities

Occupation

Co-Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2016

Transaction ID : SA11AI.4708

Amount of Each Receipt this Period

90000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. S Ray Huffines**

Mailing Address 4500 W Plano Pkwy

City State Zip Code  
 Plano TX 75093

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Huffines Auto Group

Occupation  
 Car Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2016

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ICR Contracting LLC**

Mailing Address 53132 S.R. #149  
 PO Box 122

City State Zip Code  
 Neffs OH 43940

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016

Transaction ID : SA11AI.4716

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paul J Isaac**

Mailing Address 530 5th Avenue  
 20th Floor

City State Zip Code  
 New York NY 10036

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Arbiter Partners Capital Manag

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2016

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period

20000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

125000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Benjamin N Klein**

Mailing Address 7444 Long Avenue

City  
SkokieState  
ILZip Code  
60077FEC ID number of contributing  
federal political committee.

C

Name of Employer

Platinum Health Care

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	6

Transaction ID : SA11AI.4863

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Zachary Leichtman-Levine**Mailing Address 335 N Maple Drive  
#240

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LLFO, LLC

Occupation

Financial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	6

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Leora Levy**

Mailing Address 59 Peckslan Road

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	6

Transaction ID : SA11AI.4711

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1011000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Carter Magnin**

Mailing Address 441 N Beverly Drive  
#203

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2016

**Transaction ID : SA11AI.4720**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Robert E Marling**

Mailing Address 30 South Tranquil Path

City State Zip Code  
The Woodlands TX 77380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Woodforest National Bank

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4726**

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Gary Martin**

Mailing Address PO Box 91588

City State Zip Code  
Arlington TX 75015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Martin Sprocket & Gear Inc.

Vice Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4771**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

511000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Robert McWilliams**

Mailing Address 7940 Maiden Point Ct

City

Easton

State

MD

Zip Code

21601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Federal Resources

Occupation

CEO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2016

**Transaction ID : SA11AI.4776**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Francis X Meaney**

Mailing Address 45 Bittersweet Lane

City

North Chatham

State

MA

Zip Code

02650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mintz Levin

Occupation

Lawyer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2016

**Transaction ID : SA11AI.4722**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Fletcher Michael**

Mailing Address 4490 E Sterling Drive

City

Post Falls

State

ID

Zip Code

83854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2016

**Transaction ID : SA11AI.4840**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25750.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

A. Janetta Michael

Mailing Address 4490 E Sterling Drive

City	State	Zip Code
Post Falls	ID	83854

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2016

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Janetta Michael

Mailing Address 4490 E Sterling Drive

City	State	Zip Code
Post Falls	ID	83854

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2016

Transaction ID : SA11AI.4883

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John W Michener Jr.

Mailing Address 301 Commerce St  
Suite 1470

City	State	Zip Code
Fort Worth	TX	76102

FEC ID number of contributing federal political committee.

C

Name of Employer

Michener &amp; Co LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2016

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2500.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. R Thomas Miller**

Mailing Address 1101 West 34th Street  
Suite 461

City State Zip Code  
Dallas TX 78705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2016

**Transaction ID : SA11AI.4717**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ira M Mitzner**

Mailing Address 3120 Southwest Freeway  
Suite 200

City State Zip Code  
Houston TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIDA

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4731**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Steven C Mitzner**

Mailing Address 3120 Southwest Freeway  
Suite 200

City State Zip Code  
Houston TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIDA

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4729**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Robert D Moore**

Mailing Address 65720 Barkcamp Park Rd

City State Zip Code  
 Belmont OH 43718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Murray Energy Corp

Occupation  
 EVP, COO, CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4764**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Malcolm S Morris**

Mailing Address 1980 Post Oak Blvd  
 #800

City State Zip Code  
 Houston TX 77056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Stewart Title Guaranty Co

Occupation  
 Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4756**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Wiley L Mossy**

Mailing Address 1000 Uptown Park Blvd  
 Apt 223

City State Zip Code  
 Houston TX 77056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Mossy Nissan

Occupation  
 Auto Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2016

**Transaction ID : SA11AI.4881**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

31000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Murray Energy Corporation**

Mailing Address 46226 National Road

City State Zip Code  
 St Clairsville OH 43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4766**

Amount of Each Receipt this Period

70000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. National Health Information Network Inc**

Mailing Address 101 Jim Wright Freeway  
 Suite 200

City State Zip Code  
 Fort Worth TX 76108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 14 / 2016

**Transaction ID : SA11AI.4740**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. PDX Inc**

Mailing Address 101 Jim Wright Freeway  
 Suite 200

City State Zip Code  
 Fort Worth TX 76108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 14 / 2016

**Transaction ID : SA11AI.4738**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

90000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Aaron Sean Poynton**

Mailing Address 1408 Stockton Rd

City

Joppa

State

MD

Zip Code

21085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thermo Fisher Scientific

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

**Transaction ID : SA11AI.4725**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thomas Rastin**

Mailing Address PO Box 243

City

Mount Vernon

State

OH

Zip Code

43050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ariel Corp

Occupation

Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2016

**Transaction ID : SA11AI.4719**

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Robert B Reingold**Mailing Address 1482 East Valley Raod  
Suite 601

City

Montecito

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Requested

Occupation

Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

**Transaction ID : SA11AI.4727**

Amount of Each Receipt this Period

10000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

185000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Joseph Reschini**

Mailing Address 922 Philadelphia St

City State Zip Code  
 Indiana PA 15701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Reschini Group

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2016

**Transaction ID : SA11AI.4754**

Amount of Each Receipt this Period

55000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Rida Fairfield Cove, LLC**

Mailing Address 3120 Southwest Freeway  
 Suite 200

City State Zip Code  
 Houston TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2016

**Transaction ID : SA11AI.4728**

Amount of Each Receipt this Period

26000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **c. Rida Realty Investments Group LLC**

Mailing Address 3120 Southwest Freeway  
 Suite 200

City State Zip Code  
 Houston TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2016

**Transaction ID : SA11AI.4732**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

106000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. RX COM Community Healthcare Network LLC**

Mailing Address 101 Jim Wright Freeway South  
Suite 200

City State Zip Code  
Fort Worth TX 76108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2016

**Transaction ID : SA11AI.4742**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Carla Sands**

Mailing Address 11611 San Vicente Blvd  
Suite 1000

City State Zip Code  
Los Angeles CA 90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Vintage Capital Group

Head of Real Estate Investment Firm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 05 / 2016

**Transaction ID : SA11AI.4712**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Victor Schweitzer**

Mailing Address 12528 Albers Street

City State Zip Code  
Valley Village CA 91607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Coastal Radiation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2016

**Transaction ID : SA11AI.4723**

Amount of Each Receipt this Period

1800.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

16800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Victor Schweitzer**

Mailing Address 12528 Albers Street

City

Valley Village

State

CA

Zip Code

91607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coastal Radiation

Occupation

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

04 / 12 / 2016

**Transaction ID : SA11AI.4753**

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Victor Schweitzer**

Mailing Address 12528 Albers Street

City

Valley Village

State

CA

Zip Code

91607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coastal Radiation

Occupation

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5400.00

Date of Receipt

04 / 17 / 2016

**Transaction ID : SA11AI.4848**

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Robert Shapiro**

Mailing Address 14225 Ventura Blvd  
#100

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Woodbridge Group of Co

Occupation

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

04 / 21 / 2016

**Transaction ID : SA11AI.4869**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Larry Smith**

Mailing Address 1601 Dove Street  
Suite 145

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

M.H.I. Real Co.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4735**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Strata Products Worldwide LLC**

Mailing Address 8995 Roswell Rd

City State Zip Code  
Sandy Springs GA 30350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4759**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Mark Stupfel**

Mailing Address 301 Commerce St  
Suite 1900

City State Zip Code  
Fort Worth TX 76102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kleinheinz Capital Partners

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2016

**Transaction ID : SA11AI.4770**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Swanson Industries Inc**

Mailing Address 2608 Smithtown Rd

City

Morgantown

State

WV

Zip Code

26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4755**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Mack Ed Swindle**

Mailing Address 301 Commerce St  
Suite 3500

City

Fort worth

State

TX

Zip Code

76102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Whitaker Chalk

Occupation

Member

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2016

**Transaction ID : SA11AI.4737**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Mark Taube**

Mailing Address 570 El Camino Real  
No. 150-248

City

Redwood City

State

CA

Zip Code

94063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11AI.4757**

Amount of Each Receipt this Period

35000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Alex Van Rensselaer**

Mailing Address 133 North Beach Rd

City

Hobe Sound

State

FL

Zip Code

33455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2016

**Transaction ID : SA11AI.4706**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kenneth Vaughan**

Mailing Address 16382 Eagle Lane

City

Huntington Beach

State

CA

Zip Code

92649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2016

**Transaction ID : SA11AI.4868**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. David Wallace**

Mailing Address 2853 Ken Gray Blvd  
Suite 4

City

West Frankfort

State

IL

Zip Code

62896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wallace Electrical Systems LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2016

**Transaction ID : SA11AI.4709**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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**TOTAL** This Period (last page this line number only)..... ►

13000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. John Milan Weiser**

Mailing Address 16 Trinity Oaks Rd

City

Westworth Village

State

TX

Zip Code

76114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Weiser Foundation

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2016

**Transaction ID : SA11AI.4772**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brian Wendel**

Mailing Address 2700 Neilson Way

City

Santa Monica

State

CA

Zip Code

90405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huntington Group

Occupation

Real Estate company partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2016

**Transaction ID : SA11AI.4736**

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jack Wood**

Mailing Address PO Box 4597

City

Odessa

State

TX

Zip Code

79760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2016

**Transaction ID : SA11AI.4734**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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**TOTAL** This Period (last page this line number only)..... ►

35600.00

3400662.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. Betsy Price Campaign**

Mailing Address PO Box 100066

City State Zip Code  
Fort Worth TX 76185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2016

**Transaction ID : SA11C.4880**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. KEEP THE PROMISE I**

Mailing Address 2 ROOSEVELT AVENUE

City State Zip Code  
PORT JEFFERSON STA NY 11776

FEC ID number of contributing  
federal political committee.

C C00575373

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2016

**Transaction ID : SA11C.4887**

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. MURRAY ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 46226 NATIONAL ROAD

City State Zip Code  
ST. CLAIRSVILLE OH 43950

FEC ID number of contributing  
federal political committee.

C C00410985

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2016

**Transaction ID : SA11C.4769**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

156000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 79

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

## **A. STAND FOR TRUTH, INC.**

Mailing Address 250 WEST MAIN STREET  
SUITE 1400

City State Zip Code  
LEXINGTON KY 40507

FEC ID number of contributing  
federal political committee.

**C** C00592337

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205000.00

Date of Receipt

**04** / **18** / **2016**

**Transaction ID : SA11C.4775**

Amount of Each Receipt this Period

105000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105000.00

261000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 79

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. 365 Strategies**Mailing Address 1001 Congress  
Suite 350

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Campaign Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 28 2016**Transaction ID : SB21B.4913**

Amount of Each Disbursement this Period

16875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Credit Card Contribution Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 06 2016**Transaction ID : SB21B.4986**

Amount of Each Disbursement this Period

1262.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Credit Card Contribution Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 07 2016**Transaction ID : SB21B.4984**

Amount of Each Disbursement this Period

879.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19016.77

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2016**Transaction ID : SB21B.4981**

Amount of Each Disbursement this Period

142.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 13 / 2016**Transaction ID : SB21B.4978**

Amount of Each Disbursement this Period

21.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 14 / 2016**Transaction ID : SB21B.4977**

Amount of Each Disbursement this Period

417.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

581.65



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	1		2	0	1	6		

**Transaction ID : SB21B.4959**

Amount of Each Disbursement this Period

8.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	2		2	0	1	6		

**Transaction ID : SB21B.4955**

Amount of Each Disbursement this Period

4.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	6		2	0	1	6		

**Transaction ID : SB21B.4938**

Amount of Each Disbursement this Period

779.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7	7	9	.	0	9
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 79

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2016

Transaction ID : SB21B.4924

Amount of Each Disbursement this Period

4.80
------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2016

Transaction ID : SB21B.4925

Amount of Each Disbursement this Period

1.52
------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : SB21B.4911

Amount of Each Disbursement this Period

40.56
-------

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46.88
-------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 79

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City  
Baton RougeState  
LAZip Code  
70884Purpose of Disbursement  
Credit Card Contribution Processing Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For: 2016  
☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2016
**Transaction ID : SB21B.4895**

Amount of Each Disbursement this Period

58.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ase Group Inc**Mailing Address 6600 College Blvd  
Suite 310City  
Overland ParkState  
KSZip Code  
66211Purpose of Disbursement  
Event Planning Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For: 2016  
☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016
**Transaction ID : SB21B.4916**

Amount of Each Disbursement this Period

3413.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Terry Bailey**

Mailing Address 1008 Southview Circle

City  
CenterState  
TXZip Code  
75935Purpose of Disbursement  
In-kind - Event Dinner

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2016
**Transaction ID : SB21B.5000**

Amount of Each Disbursement this Period

45202.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48674.14

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Bold Colors Consulting, LLC**Mailing Address 3125 tiger Run Court  
Suite 111

City Carlsbad State CA Zip Code 92010

Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 17 2016

Transaction ID : SB21B.4965

Amount of Each Disbursement this Period

16750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bold Colors Consulting, LLC**Mailing Address 3125 tiger Run Court  
Suite 111

City Carlsbad State CA Zip Code 92010

Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 26 2016

Transaction ID : SB21B.4929

Amount of Each Disbursement this Period

16750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City State MO Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 01 2016

Transaction ID : SB21B.4990

Amount of Each Disbursement this Period

12.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33512.00





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 79

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      07      2016
**Transaction ID : SB21B.4985**

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      11      2016
**Transaction ID : SB21B.4982**

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      11      2016
**Transaction ID : SB21B.4998**

Amount of Each Disbursement this Period

12.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      13      2016

Transaction ID : SB21B.4979

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      13      2016

Transaction ID : SB21B.4980

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2016

Transaction ID : SB21B.4972

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2016

Transaction ID : SB21B.4973

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2016

Transaction ID : SB21B.4974

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      15      2016

Transaction ID : SB21B.4975

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      18      2016
**Transaction ID : SB21B.4962**

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      21      2016
**Transaction ID : SB21B.4956**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      21      2016
**Transaction ID : SB21B.4957**

Amount of Each Disbursement this Period

12.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      21      2016

Transaction ID : SB21B.4958

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4943

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4944

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.00

**SCHEDULE B (FEC Form 3X)  
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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4949

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4951

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4953

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2016

Transaction ID : SB21B.4954

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2016

Transaction ID : SB21B.4939

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                          ☐ Senate  
                          ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2016

Transaction ID : SB21B.4940

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2016

Transaction ID : SB21B.4941

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2016

Transaction ID : SB21B.4942

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      26      2016

Transaction ID : SB21B.4930

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00



**SCHEDULE B (FEC Form 3X)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2016

Transaction ID : SB21B.4931

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2016

Transaction ID : SB21B.4932

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2016

Transaction ID : SB21B.4934

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2016

Transaction ID : SB21B.4936

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2016

Transaction ID : SB21B.4923

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016

Transaction ID : SB21B.4912

Amount of Each Disbursement this Period

12.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016

Transaction ID : SB21B.4919

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016

Transaction ID : SB21B.4920

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016

Transaction ID : SB21B.4921

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016

Transaction ID : SB21B.4922

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Incoming Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2016

Transaction ID : SB21B.4899

Amount of Each Disbursement this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2016

Transaction ID : SB21B.4905

Amount of Each Disbursement this Period

35.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2016

Transaction ID : SB21B.4906

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2016

Transaction ID : SB21B.4909

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commerce Bank**

Mailing Address 911 Main

City Kansas City      State MO      Zip Code 64105

Purpose of Disbursement  
Outgoing Wire Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2016

Transaction ID : SB21B.4910

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 79

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Doner Fundraising**Mailing Address 815 Brazos  
Suite 701

City Austin State TX Zip Code 78701

Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 17 2016**Transaction ID : SB21B.4968**

Amount of Each Disbursement this Period

53440.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Graves Garrett LLC**Mailing Address 1100 Main Street  
Suite 2700

City Kansas City State MO Zip Code 64105

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 28 2016**Transaction ID : SB21B.4917**

Amount of Each Disbursement this Period

39355.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kristina Hernandez**

Mailing Address 332 Cresthaven Pl

City Simpsonville State SC Zip Code 29681

Purpose of Disbursement  
Media Communication Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 17 2016**Transaction ID : SB21B.4967**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97795.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 79

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Kristina Hernandez**

Mailing Address 332 Cresthaven Pl

City Simpsonville   State SC   Zip Code 29681

Purpose of Disbursement  
Media Communication Services (Reimbursed Expenses)

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:   District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04   29   2016
**Transaction ID : SB21B.4898**

Amount of Each Disbursement this Period

577.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Law Office of James C Thomas III**Mailing Address 7509 NW Tiffany Springs Pkwy  
Suite 300

City Kansas City   State MO   Zip Code 64153

Purpose of Disbursement  
Legal & Reporting Services

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:   District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04   07   2016
**Transaction ID : SB21B.4964**

Amount of Each Disbursement this Period

16530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Norfleet Strategies LLC**Mailing Address 807 Brazos Street  
Suite 602

City Austin   State TX   Zip Code 78701

Purpose of Disbursement  
Strategic Political Services

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:   District:

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04   26   2016
**Transaction ID : SB21B.4927**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32107.83

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Trusted Leadership PAC

### A. Red D

001

Category/  
Type☒ Primary ☐ General  
☐ Other (specify) ▼

4193.00

 Memo Item

### B. Red Metrics LLC

001

Category/  
Type

☒ Primary ☐ General  
☐ Other (specify) ▼

50000.00

Memo Item

### C. Red Metrics LLC

001

Category/  
Type☒ Primary ☐ General  
☐ Other (specify) ▼

22646.84

 Memo Item

76839.84



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 79

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. Roy Strategies LLC**

Mailing Address PO Box 49607

City Austin                      State TX                      Zip Code 78765

Purpose of Disbursement  
Travel Expenses for Campaign Support Services

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For: 2016  
☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      29                      2016
**Transaction ID : SB21B.4900**

Amount of Each Disbursement this Period

1539.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Roy Strategies LLC**

Mailing Address PO Box 49607

City Austin                      State TX                      Zip Code 78765

Purpose of Disbursement  
Campaign Support Services

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For: 2016  
☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      29                      2016
**Transaction ID : SB21B.4903**

Amount of Each Disbursement this Period

15333.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Saratoga Strategies, LLC**

Mailing Address 1550 Old Annetta

City Aledo                      State TX                      Zip Code 76008

Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:                      District:

Disbursement For: 2016  
☒ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04                      17                      2016
**Transaction ID : SB21B.4971**

Amount of Each Disbursement this Period

15500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32372.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 79

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. Saratoga Strategies, LLC**

Mailing Address 1550 Old Annetta

City Aledo State TX Zip Code 76008

Purpose of Disbursement  
Fundraising Services (Reimbursed Expenses)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2016
**Transaction ID : SB21B.4926**

Amount of Each Disbursement this Period

1570.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Solutions for Texas in Fundraising**Mailing Address 1505 Elm St  
#1601

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
Fundraising Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2016
**Transaction ID : SB21B.4966**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Polling Company Inc**Mailing Address 400 North Capitol Street NW  
Suite 790

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Research

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary   ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2016
**Transaction ID : SB21B.4963**

Amount of Each Disbursement this Period

17088.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32658.39

378061.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. KEEP THE PROMISE PAC**

Mailing Address P.O. BOX 92225

City  
AUSTINState  
TXZip Code  
78709Purpose of Disbursement  
PAC Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2016

Transaction ID : SB23.4950

Amount of Each Disbursement this Period

50000.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KEEP THE PROMISE PAC**

Mailing Address P.O. BOX 92225

City  
AUSTINState  
TXZip Code  
78709Purpose of Disbursement  
PAC Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2016

Transaction ID : SB23.4935

Amount of Each Disbursement this Period

50000.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KEEP THE PROMISE PAC**

Mailing Address P.O. BOX 92225

City  
AUSTINState  
TXZip Code  
78709Purpose of Disbursement  
PAC Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : SB23.4995

Amount of Each Disbursement this Period

25000.00
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☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Trusted Leadership PAC

Full Name (Last, First, Middle Initial)

**A. NATIONAL RIGHT TO LIFE VICTORY FUND**

Mailing Address 512 10TH STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
Political Committee Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2016

Transaction ID : SB23.4948

Amount of Each Disbursement this Period

125000.00
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☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125000.00

250000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Trusted Leadership PAC**

Full Name (Last, First, Middle Initial)

**A. STAND FOR TRUTH, INC.**Mailing Address 250 WEST MAIN STREET  
SUITE 1400City  
LEXINGTONState  
KYZip Code  
40507Purpose of Disbursement  
Refund of PAC Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2016

**Transaction ID : SB28C.5008**

Amount of Each Disbursement this Period

105000.00
-----------

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105000.00
-----------

105000.00
-----------

Full Name of Payee Define Idea		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2016	
Mailing Address 1761 Chace Drive				Amount 5000.00	
City Hoover	State AL	Zip Code 35244		Transaction ID : SE.4602	
Purpose of Expenditure Social Media Buy		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: IN	
Calendar Year-To-Date Per Election for Office Sought		831072.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Define Idea</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2016	
Mailing Address 1761 Chace Drive				Amount 5000.00	
City Hoover	State AL	Zip Code 35244		<b>Transaction ID : SE.4610</b> Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2016	
Purpose of Expenditure Social Media		Category/ Type	004		
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: CA		
Calendar Year-To-Date Per Election for Office Sought		7806.17		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="flex-grow: 1; border-bottom: 1px solid black; position: relative;"> <div style="position: absolute; top: -10px; left: 50%; transform: translateX(-50%);">10000.00</div> </div> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 63 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>			
Full Name of Payee <b>Frontline Political Strategy</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 22 / 2016</b>	
Mailing Address <b>2830 S Hulen St #365</b>		Amount <span style="border:1px solid black; padding:2px;">54000.00</span>	
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76109</b>	<b>Transaction ID : SE.4574</b>
Purpose of Expenditure <b>Door-to-Door; Telephone Calls and other GOTV effort</b>		Category/Type <span style="border:1px solid black; padding:2px;">004</span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 22 / 2016</b>
Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">694893.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Frontline Political Strategy</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 27 / 2016</b>	
Mailing Address <b>2830 S Hulen St #365</b>		Amount <span style="border:1px solid black; padding:2px;">54000.00</span>	
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76109</b>	<b>Transaction ID : SE.4644</b>
Purpose of Expenditure <b>Door-to-Door; Telephone Calls and other GOTV effort</b>		Category/Type <span style="border:1px solid black; padding:2px;">004</span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 27 / 2016</b>
Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">1765249.04</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;">108000.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>05 / 20 / 2016</b>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Frontline Political Strategy</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 28 / 2016</b>		
Mailing Address 2830 S Hulen St #365			Amount <span style="border: 1px solid black; padding: 2px;">50000.00</span>		
City State Zip Code Fort Worth TX 76109		<b>Transaction ID : SE.4652</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 28 / 2016</b>			
Purpose of Expenditure Door-to-Door; Telephone Calls and other GOTV effort		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>RAFAEL EDWARD 'TED' CRUZ</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2065249.04</span>		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
Full Name of Payee <input type="checkbox"/> Memo Item <b>Glittering Steel LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 14 / 2016</b>		
Mailing Address C/o Feemark Financial LLP 8383 Wilshire Blvd Suite 1000			Amount <span style="border: 1px solid black; padding: 2px;">25750.00</span>		
City State Zip Code Beverly Hills CA 90211		<b>Transaction ID : SE.4460</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 15 / 2016</b>			
Purpose of Expenditure Media Production		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>JOHN R KASICH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">520403.90</span>		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">75750.00</span>		
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
<b>(c) TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kurt O'Keefe</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>05 / 20 / 2016</b>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 65 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>				
Full Name of Payee <b>Glittering Steel LLC</b>			<input type="checkbox"/> Memo Item	
Mailing Address C/o Feemark Financial LLP 8383 Wilshire Blvd Suite 1000			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 29 / 2016</b>	
City Beverly Hills		State CA	Zip Code 90211	Amount <span style="border:1px solid black; padding:2px;">4000.00</span>
Purpose of Expenditure Media Production		Category/Type <span style="border:1px solid black; padding:2px;">004</span>		Transaction ID : <b>SE.4666</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 29 / 2016</b>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">2333109.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>One Harbor LLC</b>			<input type="checkbox"/> Memo Item	
Mailing Address PO Box 22942			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 14 / 2016</b>	
City Houston		State TX	Zip Code 77227	Amount <span style="border:1px solid black; padding:2px;">6500.00</span>
Purpose of Expenditure Media Production		Category/Type <span style="border:1px solid black; padding:2px;">004</span>		Transaction ID : <b>SE.4457</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>04 / 15 / 2016</b>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">430903.90</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">46500.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Kurt O'Keefe</i>			Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <b>05 / 20 / 2016</b>	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 66 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00609511</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div>			
Full Name of Payee <b>One Harbor LLC</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> 03 / 28 / 2016	
Mailing Address PO Box 22942		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">18100.00</div>	
City Houston	State TX	Zip Code 77227	<b>Transaction ID : SE.4458</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> 04 / 15 / 2016
Purpose of Expenditure Media Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">538531.86</div>			
Full Name of Payee <b>One Harbor LLC</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> 04 / 26 / 2016	
Mailing Address PO Box 22942		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">6500.00</div>	
City Houston	State TX	Zip Code 77227	<b>Transaction ID : SE.4636</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> 04 / 26 / 2016
Purpose of Expenditure Media Production		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1711249.04</div>			
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">24600.00</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY</div> 05 / 20 / 2016	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 67 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>					
Full Name of Payee <b>Red Metrics LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1288 Blue Lake Dr			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 04 / 15 / 2016		
City Frisco		State TX	Zip Code 75033	Amount <span style="border:1px solid black; padding:2px;">63750.00</span>	
Purpose of Expenditure Digital & Social Media Buy		Category/Type <span style="border:1px solid black; padding:2px;">004</span>		Transaction ID : <b>SE.4459</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 04 / 15 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: 00 State: NY		
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">494653.90</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Red Metrics LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1288 Blue Lake Dr			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 04 / 15 / 2016		
City Frisco		State TX	Zip Code 75033	Amount <span style="border:1px solid black; padding:2px;">12750.00</span>	
Purpose of Expenditure Digital & Social Media Buy		Category/Type <span style="border:1px solid black; padding:2px;">004</span>		Transaction ID : <b>SE.4468</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 04 / 15 / 2016	
Name of Federal Candidate JOHN R KASICH			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: 00 State: NY		
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">558153.90</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;">76500.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			<span style="border:1px solid black; padding:2px;"></span>		
(c) TOTAL Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Kurt O'Keefe</i>			Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 05 / 20 / 2016		
			[Electronically Filed]		

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**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 68 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Red Metrics LLC</b>		<input type="checkbox"/> Memo Item	
Mailing Address 1288 Blue Lake Dr		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>	
City Frisco	State TX	Zip Code 75033	Amount <span style="border: 1px solid black; padding: 2px;">8500.00</span>
Purpose of Expenditure Digital & Social Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4469</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">566653.90</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Red Metrics LLC</b>		<input type="checkbox"/> Memo Item	
Mailing Address 1288 Blue Lake Dr		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">22</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>	
City Frisco	State TX	Zip Code 75033	Amount <span style="border: 1px solid black; padding: 2px;">11794.00</span>
Purpose of Expenditure Social Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.4585</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>RI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11794.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<span style="border: 1px solid black; padding: 2px;">20294.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶		<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures..... ▶		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> <div style="text-align: center;">[Electronically Filed]</div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 69 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00609511</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div>			
Full Name of Payee <b>Red Metrics LLC</b>		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">04 / 29 / 2016</div>	
Mailing Address 1288 Blue Lake Dr		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">10000.00</div>	
City Frisco	State TX	Zip Code 75033	<b>Transaction ID : SE.4665</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">04 / 29 / 2016</div>
Purpose of Expenditure Media Buy		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 50px; text-align: center;">004</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IN	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2293109.00</div>			
Full Name of Payee <b>Rigel Strategies LLC</b>		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">04 / 14 / 2016</div>	
Mailing Address 3948 Legacy Drive Suite 106-282		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">74903.90</div>	
City Plano	State TX	Zip Code 75023	<b>Transaction ID : SE.4435</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">04 / 13 / 2016</div>
Purpose of Expenditure Media Buy		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 50px; text-align: center;">004</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: NY	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">424403.90</div>			
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">174903.90</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">05 / 20 / 2016</div>	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 70 OF 79  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>					
Full Name of Payee <b>Rigel Strategies LLC</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> <b>04 / 24 / 2016</b>		
Mailing Address 3948 Legacy Drive Suite 106-282			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">65237.50</div>		
City Plano		State TX	Zip Code 75023		Transaction ID : <b>SE.4599</b>
Purpose of Expenditure Radio Buy and Production		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> <b>04 / 25 / 2016</b>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">760834.54</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Rigel Strategies LLC</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> <b>04 / 24 / 2016</b>		
Mailing Address 3948 Legacy Drive Suite 106-282			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">32618.75</div>		
City Plano		State TX	Zip Code 75023		Transaction ID : <b>SE.4600</b>
Purpose of Expenditure Radio Buy and Production		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> <b>04 / 25 / 2016</b>	
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">793453.29</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">97856.25</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Kurt O'Keefe</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> <b>05 / 20 / 2016</b>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 71 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00609511</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Full Name of Payee <b>Rigel Strategies LLC</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 3948 Legacy Drive Suite 106-282		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 32618.75	
City Plano	State TX	Zip Code 75023	<b>Transaction ID : SE.4601</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Purpose of Expenditure Radio Buy and Production		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> 004	
Name of Federal Candidate JOHN R KASICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IN
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 826072.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Rigel Strategies LLC</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 3948 Legacy Drive Suite 106-282		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 52859.96	
City Plano	State TX	Zip Code 75023	<b>Transaction ID : SE.4653</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Purpose of Expenditure Radio Buy		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> 004	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: IN
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2118109.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 85478.71	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> 05 / 20 / 2016	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 72 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00609511</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Full Name of Payee <b>September Group LLC</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 1712 Pioneer Ave Suite 115		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 25000.00	
City Cheyenne	State WY	Zip Code 82001	<b>Transaction ID : SE.4461</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Purpose of Expenditure Live Calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 545403.90			
Full Name of Payee <b>SRCP Media, Inc.</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 201 N Union St Suite 200		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 174750.00	
City Alexandria	State VA	Zip Code 22314	<b>Transaction ID : SE.4433</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Purpose of Expenditure Media Buy		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate JOHN R KASICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 174750.00			
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 199750.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> [Electronically Filed]	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span>					
Full Name of Payee <b>SRCP Media, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 14 / 2016</b>		
Mailing Address 201 N Union St Suite 200			Amount <span style="border: 1px solid black; padding: 2px;">174750.00</span>		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>SE.4434</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 13 / 2016</b>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">349500.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>SRCP Media, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 22 / 2016</b>		
Mailing Address 201 N Union St Suite 200			Amount <span style="border: 1px solid black; padding: 2px;">487078.68</span>		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>SE.4573</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>04 / 21 / 2016</b>	
Name of Federal Candidate JOHN R KASICH			<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">487078.68</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">661828.68</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kurt O'Keefe</u>			Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>05 / 20 / 2016</b>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 74 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>SRCP Media, Inc.</b>		<input type="checkbox"/> Memo Item	
Mailing Address 201 N Union St Suite 200		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">22</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Alexandria	State VA	Zip Code 22314	Amount <span style="border:1px solid black; padding:2px;">153814.32</span>
Purpose of Expenditure Media Buy	Category/ Type	<span style="border:1px solid black; padding:2px;">004</span>	
Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>	
<span style="border:1px solid black; padding:2px;">640893.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>SRCP Media, Inc.</b>		<input type="checkbox"/> Memo Item	
Mailing Address 201 N Union St Suite 200		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">28</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Alexandria	State VA	Zip Code 22314	Amount <span style="border:1px solid black; padding:2px;">505257.75</span>
Purpose of Expenditure Media Buy	Category/ Type	<span style="border:1px solid black; padding:2px;">004</span>	
Name of Federal Candidate <b>RAFAEL EDWARD 'TED' CRUZ</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>	
<span style="border:1px solid black; padding:2px;">1336329.79</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		<span style="border:1px solid black; padding:2px;">659072.07</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kurt O'Keefe</i>		Date <span style="border:1px solid black; padding:2px;">05</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>					
Full Name of Payee <b>SRCP Media, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 28 / 2016</b>		
Mailing Address 201 N Union St Suite 200			Amount <span style="border: 1px solid black; padding: 2px;">168419.25</span>		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Buy		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>SE.4632</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 25 / 2016</b>	
Name of Federal Candidate JOHN R KASICH			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1504749.04</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>SRCP Media, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 28 / 2016</b>		
Mailing Address 201 N Union St Suite 200			Amount <span style="border: 1px solid black; padding: 2px;">200000.00</span>		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Buy		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : <b>SE.4650</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>04 / 28 / 2016</b>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1965249.04</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">368419.25</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kurt O'Keefe</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <b>05 / 20 / 2016</b>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00609511       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>Stars and Stripes</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 7560 W 100th Place				<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 25 / 2016</div> </div>	
City Bridgeview		State IL		Zip Code 60455	
Purpose of Expenditure Printing		Category/Type 004		Amount 704.04	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IN	
Calendar Year-To-Date Per Election for Office Sought		695597.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Stars and Stripes</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 7560 W 100th Place				<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 25 / 2016</div> </div>	
City Bridgeview		State IL		Zip Code 60455	
Purpose of Expenditure Printing		Category/Type 004		Amount 2806.17	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		2806.17		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	3510.21
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kurt O'Keefe

[Electronically Filed]

Date

 MM / DD / YYYY  
 05 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 77 OF 79  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00609511</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>					
Full Name of Payee <b>Targeted Victory</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>		
Mailing Address    1033 North Fairfax Street Suite 400			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">50000.00</div>		
City    State    Zip Code Alexandria    VA    22314		<b>Transaction ID : SE.4581</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>			
Purpose of Expenditure Social Media Buy		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>		<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">50000.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Targeted Victory</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>		
Mailing Address    1033 North Fairfax Street Suite 400			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">150000.00</div>		
City    State    Zip Code Alexandria    VA    22314		<b>Transaction ID : SE.4633</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>			
Purpose of Expenditure On-Line Media Buy		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>		<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654749.04</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">200000.00</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Kurt O'Keefe</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>		
			[Electronically Filed]		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Trusted Leadership PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00609511
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Targeted Victory</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 28 / 2016</b>
Mailing Address 1033 North Fairfax Street Suite 400			Amount <b>50000.00</b>
City Alexandria	State VA	Zip Code 22314	Transaction ID : <b>SE.4651</b>
Purpose of Expenditure On-Line Media Advertising	Category/Type <b>004</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 28 / 2016</b>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought		<b>2015249.04</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Targeted Victory</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 29 / 2016</b>
Mailing Address 1033 North Fairfax Street Suite 400			Amount <b>75000.00</b>
City Alexandria	State VA	Zip Code 22314	Transaction ID : <b>SE.4664</b>
Purpose of Expenditure On-Line Media Buy	Category/Type <b>004</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 29 / 2016</b>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought		<b>2193109.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>125000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	<b>2987463.07</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kurt O'Keefe

[Electronically Filed]

Date

MM / DD / YYYY  
**05 / 20 / 2016**

Signature